



Iowa Department of Human Services

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INFORMATIONAL LETTER NO.1518

Date: June 18, 2015

TO: Iowa Medicaid Home and Community-Based Services (HCBS) Waiver Providers, Case Managers, Department of Human Services (DHS) Service Workers and Supervisors and Service Area Managers

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Rule Changes to the HCBS Waiver Transportation Service and the Intellectual Disability Waiver Program

EFFECTIVE: Effective July 1, 2015

Rule changes will take effect July 1, 2015, that will impact HCBS waiver members and providers. The rule changes will affect medical transportation provided by enrolled HCBS service providers, Intellectual Disability (ID) Waiver eligibility criteria and provider cost reporting.

The Centers for Medicare and Medicaid Services (CMS) has been in the process of reviewing the waiver application renewal since April 2014. The IME received notice from CMS on June 2, 2015, that the ID Waiver had been renewed for the five year time period from July 1, 2014, through June 30, 2019. During the review process, CMS identified areas of the ID Waiver program that were out of compliance with the federal regulations and required changes to the waiver application and the Iowa Administrative Code. Although these provisions were previously approved in the initial and subsequent waiver application and renewals, the state is required to make the following rule changes:

- Remove transportation to medical appointments from the HCBS Waiver Transportation service description and when provided as part of the supported community living (SCL) service in the Intellectual Disability (ID) and Brain Injury (BI) Waivers.
- Remove a “related condition” as a basis of eligibility for Residential Based Supported Community Living (RBSCL) service under the ID Waiver.
- Change the definition of an Intellectual Disability to the updated Diagnostic and Statistical Manual of Mental Disorders, Fifth edition (DSM-5).

HCBS Waiver Transportation Providers:

During the ID Waiver renewal review, CMS clarified that only non-medical transportation may be provided through HCBS waiver services. All medical transportation must be provided through the Non-Emergency Medical Transportation (NEMT) broker under contract with the IME. The NEMT broker contracts with individuals and transportation providers throughout Iowa to pay the cost of transportation to and from medical appointments for all Iowa Medicaid

recipients needing medical transportation. To receive reimbursement, a transportation provider must enroll with the NEMT broker. Information on enrollment with the NEMT program is found on the [TMS Management Group, Inc. website](http://www.tmsmanagementgroup.com/tmsmanagementgroup/index.php/iowa-medicaid-net-program/)¹

HCBS waiver transportation providers may no longer bill the IME for transporting a member to and from medical appointments. Individual members that need the NEMT service must contact the NEMT broker to arrange transportation prior to the medical appointment. A HCBS member should not contact the HCBS transportation provider directly for trips to medical appointments.

SCL Transportation Providers:

The NEMT broker will pay for the cost of transportation and does not pay for the cost of the support staff needed to transport the member to the medical appointment. SCL providers may provide the staff support for medical transportation as part of the SCL service but may not include the costs of the medical transportation in the rate structure. No medical transportation costs may be included as part of the \$1,570 funds used for SCL rate development or the SCL cost reports. SCL providers may need to assist members in arranging medical transportation with the NEMT broker. Additional information for booking a trip can be found on the [DHS NEMT](http://dhs.iowa.gov/ime/members/medicaid-a-to-z/NEMT)² website.

The transportation rule change will not affect the provision of the Consumer Directed Attendant Care (CDAC) service. An individual CDAC provider or CDAC agency may provide transportation to and from medical appointments but cannot include the cost of transportation. Members that use CDAC for transportation to a medical appointment should contact the NEMT broker for travel reimbursement as needed.

ID Waiver Eligibility for RBSCCL and DSM-5 Definition:

Eligibility for the ID Waiver currently states that a member must:

- Have a diagnosis of mental retardation or, for residential-based supported community living services only, be a person with a related condition as defined in rule 441—83.60(249A).

After July 1, 2015, eligibility for the ID Waiver will require that a member have a diagnosis of an intellectual disability made in accordance with the criteria provided in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) published by the American Psychiatric Association. All psychological evaluations completed after July 1, 2015, must use the DSM-5 criteria in determining a diagnosis of an intellectual disability.

Effective July 1, 2015, a member with a related condition as defined in rule, but does not have an ID diagnosis, will no longer be eligible for the RBSCCL service. Historically, no member has accessed the RBSCCL service using these criteria. To be eligible for the RBSCCL service, a member must meet the ID Waiver eligibility criteria.

¹ <http://www.tmsmanagementgroup.com/tmsmanagementgroup/index.php/iowa-medicaid-net-program/>

² <https://dhs.iowa.gov/ime/members/medicaid-a-to-z/NEMT>

In addition to the above rule changes required by CMS, one additional rule change will become effective July 1, 2015. Rules will allow the reasonable costs of direct care staff training be treated as direct care costs, rather than as indirect administrative costs.

The transportation and ID Waiver eligibility rules are attached.

Please submit any questions to HCBSwaivers@dhs.state.ia.us.